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24628 7590 07/18/2006 WELSH & KATZ, LTD 120 S RIVERSIDE PLAZA 22ND FLOOR				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
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APPLICATION NO.	FILING DATE	· ·	FIRST NAMED INVENTOR	A	ITORNEY DOCKET NO.	CONFIRMATION NO.
10/684,645	10/14/2003		John Trankina		7967/83952	3212
CITLE OF INVENTION	: TOWER REINFORCE	MENT				_
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FI	EE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	10/18/2006
EXAM	INER	ART UNIT	CLASS-SUBCLASS			
TRAN, CHUC		2821	343-890000			
2. For printing on the patent front page, list CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The endinge of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The endinge of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The endinge of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Change of a single firm (having as a member a registered attorneys or agents. If no name is listed, no name will be printed. Change of correspondence address (or Change of Correspondence attorneys or agents or ag						
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☑ Issue Fee ☑ Publication Fee (N ☐ Advance Order - #	o small entity discount p	ermitted)	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-2035 (enclose an extra copy of this form).			
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